aluation of MCOs: Metropolitan Health Plan

The Minnesota Department of Human Services will soon begin negotiations with health plans for renewal of Managed Care contracts in your county. Your feedback on the service your county recipients receive from Managed Care Organizations (MCOs) will help us prepare for contract negotiations.

It's important that we hear from all counties, so please take a few minutes to provide your feedback on each MCO operating in your county. There are seven services (Elderly Waiver, Chemical Dependency, Adult Mental Health, Children's Mental Health, Public Health, Transportation and Network Adequacy). Your county should complete all service questions for each MCO operating in your County.

You may open of the survey if you wish to review all the questions before beginning the survey, or at any time.

You have three options for completing the survey:

- 1. One county staff person (e.g. County Director) can complete all surveys online using the links provided. If you need to come back later to finish, just click SAVE. You will be prompted to enter your email address. You will receive a unique link which can be used to complete the survey at a later time. When all sections of the survey are completed, click SUBMIT. This will send your survey data to DHS.
- 2. The survey link can be forwarded to multiple county staff. They can complete their respective section(s) and click SUBMIT. This will send each individual completed survey section to DHS.
- 3. One or more County staff can work off of a printed PDF version of the survey. One person compiles and enters the responses into the online survey using the links provided. After responses are entered into the online survey, click SUBMIT to send the completed survey data to DHS.

To navigate between pages, use the BACK and NEXT buttons at the bottom of each page.

DO NOT USE THE BACK ARROW ON YOUR BROWSER.

5	Select your county:
	Click Here ▼
	Aitkin
	Anoka
	Becker
	Beltrami
	Benton
	Big Stone
	Blue Earth
	Brown
	Carlton
	Carver
	Cass
	Chippewa
	Chisago
	Clay Clearwater
	Cook
	Cottonwood
	Crow Wing
	Dakota
	Dodge
	Douglas
	Faribault
	Fillmore
	Freeborn
	Goodhue
	Grant
	Hennepin
	Houston
	Hubbard
	Isanti
	Itasca Jackson
	Kanabec
	Kandiyohi
	Kittson
	Koochiching
	Lac qui Parle
	Lake
	Lake of the Woods
	LeSueur
	Lincoln
	Lyon
	McLeod
	Mahnomen Marshall
	Martin
	Meeker
	Mille Lacs
	Morrison
	Mower
	Murray
	Nicollet
	Nobles
	Norman
	Olmsted
	Otter Tail
	Pennington
	Pine
	Pipestone
	Polk

Select your county:

Pope

Ramsey

Red Lake

Redwood

Renville

Rice

Rock

Roseau

St Louis

Scott

Sherburne

Sibley

Stearns

Steele

Stevens

Swift

Todd

Traverse

Wabasha

Wadena

Waseca

Washington

Watonwan

Wilkin

Winona

Wright

Yellow Medicine

Ch	eck the service(s) for which you will evaluate Metropolitan Health Plan. (Check all that apply.)
	Elderly Waiver
	Chemical Dependency
	Adult Mental Health
	Children's Mental Health
	Public Health
	Transportation
	Network Adequacy

gree Disagree C C C C C C C C C C C C C C C C C C C	Strongly Disagree C C
	0
	0
0 0	
	O
rds to Elderly	
	y Waiver?
	olitan F

For Chemical Dependency, indicate how much you agree or disagree	with each	n item. N	letropolita	an Health Strongly	Plan
	Agree	Agree	Disagree	Disagree	
is able to answer your questions accurately and resolve issues in a timely manner (for example, billing and coverage issues).	Ō	O	Õ	Õ	
has policies and procedures that are clear and easy to follow (for example, how to obtain authorization for service or how to file an appeal).	0	0	0	\odot	
\dots has an adequate number of chemical dependency providers in network to meet needs of enrollees.	\bigcirc	\odot	\odot	\bigcirc	
monitors and ensures appropriate access to services where provider access is limited.	0	0	0	\odot	
ensures access to sufficient length and level of intensity of treatment services.	\odot	\bigcirc	\odot	0	
is actively involved in improving the quality of care and service provided to enrollees.	0	0	0	0	
All things considered, how satisfied are you with Metropolitan Health	Dlan in re	vaarde ta	o Chemic	al Donone	lonev?
	rian in re	garus ti	Cileilic	ai Depend	iency:
Completely satisfied					
Satisfied					
Dissatisfied					
Comletely dissatisfied					
What changes would most improve the Chemical Dependency service	you rece	eive fron	n Metropo	litan Hea	Ith Plan?

For Adult Mental Health, indicate how much you agree or disagree with		em. Metı	opolitan l		
	Strongly Agree	Agree	Disagree	Strongly Disagree	
is able to answer your questions accurately and resolve issues in a timely manner (for example, billing and coverage issues).	\odot	0	0	O	
has policies and procedures that are clear and easy to follow (for example, how to obtain authorization for service or how to file an appeal).	\odot	O	O	0	
has an adequate number of adult mental health providers in network to meet needs of enrollees.	\bigcirc	\odot	0	\odot	
monitors and ensures timely access to services where provider access is limited.	0	0	0	0	
partners with county in identifying gaps and needs in the Mental Health system and planning for system improvements and new services.	\bigcirc	0	\odot	0	
has adequate number of culturally competent providers and interpreters to ensure access to needed Adult Mental Health services by enrollees from diverse communities.	0	0	0	0	
has adequate transportation services to assist enrollees in accessing needed adult mental health services.	\bigcirc	0	\odot	0	
pays providers in county in a timely manner.	0	\odot	\odot	\odot	
assures that adult enrollees' have access to health screenings, routine and preventative health care services.	\bigcirc	0	\odot	\odot	
has prompt involvement of MCO (MCO staff or contracted provider) in coordinating services and diversion planning when an adult member is facing civil commitment.	0	0	0	0	
All things considered, how satisfied are you with Metropolitan Health F Completely satisfied Satisfied Dissatisfied Completely dissatisfied					
What changes would most improve the Adult Mental Health service yo	u receive	e from M	etropolita	an Health Pla	<u>n?</u>

For Children's Mental Health, indicate how much you agree or disagree		ch item.	Metropo		lan
	Strongly Agree	Agree	Disagree	Strongly Disagree	
is able to answer your questions accurately and resolve issues in a timely manner (for example, billing and coverage issues).	0	0	0	0	
has policies and procedures that are clear and easy to follow (for example, how to obtain authorization for service or how to file an appeal).	0	0	\odot	lacksquare	
has an adequate number of children's mental health providers in network to meet needs of enrollees.	\odot	0	\bigcirc	0	
monitors and ensures appropriate access to services where provider access is limited.	\odot	0	\odot	0	
is actively involved in improving the quality of care and service provided to enrollees.	0	0	0	0	
partners with county in identifying gaps and needs in the Mental Health system and planning for system improvements and new services.	\odot	0	\odot	0	
has adequate number of culturally competent providers and interpreters to assure access to needed Children's Mental Health services by enrollees from diverse communities.	0	0	0	O	
has adequate transportation services to assist enrollees in accessing needed Children's Mental Health services.	\odot	0	\odot	0	
assures that child enrollees' have access to health screenings, routine and preventative health care services.	\bigcirc	\bigcirc	\odot	0	
pays providers in county in a timely manner.	\odot	\odot	\odot	\odot	
Completely dissatisfied					
Has Metropolitan Health Plan been involved in any collaborative with the psychiatrists, therapists and other mental health professionals? Please			ress the	shortage of	
psychiatrists, therapists and other mental health professionals: I least	e expiaii	·			
How has Metropolitan Health Plan addressed wait times of enrollees tr	ying to s	chedule	follow-u	p appointme	nts
after intake/diagnostics?					

For Public Health, indicate how much you agree or disagree with each	h item. Me	etropolit	an Health	Plan
	Strongly Agree	Agree	Disagree	Strongly Disagree
meets with your county to discuss and develop mutual objectives related to public health priorities.	O	C	O	C
is fully engaged in programs developed collaboratively by the PMAP Public Health Goals ad hoc Workgroup (i.e. Immunizations, Tobacco or Response to Violence).	0	0	0	C
is actively involved in integrating Public Health into their service programs and providing access to these services to enrollees.	\odot	0	0	lacktriangle
helps to provide access to Public Health services.	\odot	\odot	\odot	\odot
works collaboratively with the county's Public Health Agency.	0	\bigcirc	0	0
All things considered, how satisfied are you with Metropolitan Health	Plan in re	egards to	Public F	lealth?
Completely satisfied				
Satisfied				
© Dissatisfied				
Completely dissatisfied				
Completely dissausified				
In addition to Public Health goals, i.e. Tobacco Use Prevention and Co	ontrol Bo	cnonco	to Violon	no and
Immunizations, what is the County's top Public Health goal? Please ic		sponse	to violetii	ce, and
, and it, and it is a second of the second o	•			
Is there any other Public Health goal(s) that the county would like to c	collaborat	e on wit	h Metropo	olitan Health Plan?
geni(e) man me commit me me com				
How often does the county meet with Metropolitan Health Plan to disc	cuss Publ	ic Healtl	n goals?	
What Public Health programs would you like to see prioritized in the 2	2016 cont	ract yea	r?	

For Transportation, indicate how much you agree or disagree with each	ch item. N Strongly	letropol	itan Healt	h Plan Strongly	
	Agree	Agree	Disagree	Disagree	
has policies and procedures that are clear and easy to follow (for example, billing, how to obtain authorization for service or how to file an appeal).	0	\bigcirc	0	0	
has an adequate number of transportation providers in network to meet needs of enrollees.	f O	\odot	0	0	
has an adequate number of ambulatory and wheelchair providers in their network to meet the needs of enrollees.	0	\bigcirc	\odot	0	
monitors and ensures appropriate access to services where provider access is limited.	0	\bigcirc	0	0	
is flexible in scheduling rides to meet enrollees' needs (for example, obtaining a ride for hospital discharge).	0	\bigcirc	0	0	
makes scheduling convenient for recipients.	0	0	\bigcirc	\odot	
C Satisfied Dissatisfied Completely dissatisfied					
What changes would most improve the Transportation service you rec	ceive fron	n Metro _l	oolitan He	ealth Plan?	

For Network Adequacy, Indicate now much you agree or disagree with each item. Metropolitan Health Plan Strongly Strongly							
	Agree	Agree	Disagree	Disagree			
contracts with most of your local providers.	0	0	\odot	0			
has a network that positively impacts access to services.	\odot	0	\odot	0			
offers adequate range of primary and specialty services that meets the enrollees needs in your county.	' ©	0	0	O			
All things considered, how satisfied are you with Metropolitan Health I	Plan in re	gards to	Network	Adequacy?			
Completely satisfied							
C Satisfied							
C Dissatisfied							
Completely dissatisfied							
How does the county learn about changes to the Metropolitan Health F	Plan netw	ork?					

Please include any other areas of concern (e.g., pharmacy, interpreter services, etc.) you may have about the services provided by Metropolitan Health Plan.							

Please provide yo need regarding th	ur name and contact information for any clarification is survey.	that DHS may
Survey Respondent Name:		
Survey Respondent Title:		
Phone #:		
Email:		
If different than alup.	pove, please provide the name of a county contact for	MCO follow-
County Contact Name:		
County Contact Title		
Phone #:		
Email:		

Thank you for taking the time to share your opinions.

Please click the **submit** button. Thank You!